COCONINO COUNTY HEALTH DEPARTMENT



Barbara Worgess
Department Director

ENVIRONMENTAL QUALITY

PROCEDURE FOR OBTAINING ENDORSEMENT OF NOTICE OF INTENTION TO DRILL A WELL

To obtain endorsement from Environmental Services to drill, deepen, replace or modify a well, Coconino County Environmental Quality must determine that there are no onsite wastewater systems within a 100 feet of your proposed well. The department must review your application and site plan, make a site visit, and perform a record search of our wastewater files. **Please clearly mark the well site by staking or flagging.**

The following must be submitted before endorsement is given:

- 1. Complete attached application for Notice of Intent to Drill a Well, and submit with \$164.00 fee. Make check payable to C.C.D.H.S.
- 2. Submit ADWR Notice of Intention (NOI) form attached.
- 3. Submit site plan (include physical address, landmarks etc.), drawn to scale, as referenced in the NOI instructions. Make sure you include your Assessor's Parcel Number. Also include detailed directions and drawn map to the property by completing the "property locator form".
- 4. Submit appropriate ADWR fee, check payable to ADWR. It will be sent along with your completed NOI forms to the state. (\$100 (Residential or \$150 Commercial)

After completing our review, our office will forward all documents to ADWR. There is a 15-day processing time for the ADWR office. (All forms not complete will be returned).

If there are any questions, please contact us using the information below.

PLEASE ALLOW 10 WORKING DAYS FOR ENVIRONMENTAL SERVICES TO REVIEW APPLICATIONS.



COCONINO COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL QUALITY

Barbara Worgess Director

APPLICATION FOR NOTICE OF INTENT TO DRILL A WELL

ON-SITE INSPECTION FEE: \$164.00	☐Residential ☐Commercial	
Location of Property (i.e.: Subdivision, Unit, Lot):		
Assessor's Parcel # (<u>Required</u>):(Please call 928-779-6502 if you do not know the Asseptic Permit Number:	ssessor's Parcel #)	
Name of Property Owner/Business Name:		
Owner's Mailing Address:		
	_Telephone:	
Name of Well Driller:	Telephone:	
Septic System currently on property?	Shown on Site Plan?	
	Shown on Site Plan?	
CHECKLIST:\$164.00 CHECK TO CCDHS	DO NOT WRITE BELOW THIS LINE	
ADWR Notice Of Intent to Drill	Date Received	
ADWR Site Plan	Receipt Number	
\$100.00 ADWR Check <35gpm or		
\$150.00 ADWR Check >35gpm or	Comments:	
\$160.00 ADWR Check – Commercial		
Well Site staked or flagged		
County - Property Locator form		



COCONINO COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL QUALITY

PROPERTY LOCATOR

NAME:	PHONE #	
SUBDIVISION:	UNIT#	LOT#
PARCEL#		
DIRECTIONS FROM THE NEAREST HIGHWAV.		
		_
MAP (Must provide a detailed drawing that includes landmarks, street	sions indicator of North	P. milaaga)
MAP (Must provide a detailed drawing that includes fandihalks, street	signs, indicator or north c	x mneage).